### Edgar Filing: BANK OF HAWAII CORP - Form 4

BANK OF I	HAWAI	II CORP										
Form 4 February 08	2017											
FORM	ЛЛ										OMB AF	PPROVAL
	/ ••	UNITED S	TATES				ND EX D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287
Check th if no lon											Expires:	January 31, 2005
subject to Section 16. Form 4 or Form 5 Filed		Filed purs	uant to S	Section 1	e Act of 1934,	Estimated a burden hou response	average					
may con See Instr 1(b).	tinue. 30	ection 17(a		of the In	•		•	· ·		1935 or Sectior 0	1	
(Print or Type	Response	es)										
1. Name and A TANOUE 1			erson <u>*</u>	Symbol			Ticker or		-	5. Relationship of Issuer	Reporting Pers	son(s) to
(Last)	(Fir	(First) (Middle) BANK OF HAWAII CORP [BOH] 3. Date of Earliest Transaction					(Checl	k all applicable	;)			
(M			(Month/D	(Month/Day/Year) 02/07/2017					Director 10% Owner Officer (give title Other (specify below) below) Vice Chair			
HONOLUI	(Stro			4. If Ame Filed(Mor			-	l		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	one Reporting Pe	rson
(City)	(Sta		Zip)							Person		
			-			on-D			-	uired, Disposed of		-
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
					Code	V	Amount	(D)	Price \$	(IIISU: 5 and +)		
Common Stock	02/07	/2017			S		4,168	D	83.52 (1)	23,780	D	
Common Stock	02/07	/2017			S		5,093	D	\$ 83.34 (1)	18,687	D	
Common Stock	02/07	/2017			S		300	D	\$ 83.4	18,387	D	
Common Stock	02/07	/2017			S		4,604	D	\$ 83.41	13,783	D	
										27 (2)	Ι	

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Common Stock			Cust under UMTA for daughter
Common Stock	987	Ι	Mother's Trust $(3)$

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Addr</b>	ess	Relationships								
	Director	10% Owner	Officer	Other						
TANOUE DONNA A P.O. BOX 2900 HONOLULU, HI 96846			Vice Chair							
Signatures										
DONNA TANOUE	02/08/2017									
**Signature of Reporting Person	Date									

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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- (1) The price reported in Column 4 for the sale on 2/7/2017 is a weighted average sale price. Reporting person will provide, upon request, full information regarding the number of shares sold at each separate price set forth in this footnote.
- (2) Reporting person disclaims personal ownership of these shares.
- The reporting person is a co-trustee of her mother's revocable living trust, and is a contingent remainder man with respect to the amounts(3) held, but disclaims beneficial ownership of the securities held in this capacity. This report shall not be deemed an admission of beneficial ownership of the securities held within this trust for purposes of Section 16 or for an other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.